

**Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.**

Substitute for form 1449/PTO				<i>Complete If Known</i>
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>				
(Use as many sheets as necessary)				
Sheet	1	of	2	Attorney Docket Number
				2565-0273P
Application Number	10/642,508-Conf. #1661			
Filing Date	August 18, 2003			
First Named Inventor	Shunichi SEKIGUCHI			
Art Unit	2621			
Examiner Name	T. T. Vo			

U.S. PATENT DOCUMENTS

---

**FOREIGN PATENT DOCUMENTS**

---

**Examiner Signature** \_\_\_\_\_ **Date Considered** \_\_\_\_\_

"EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant." CITE NO.: Those application(s) which are marked with an asterisk (\*) next to the Cite No. are not cited (under 37 CFR 1.56(b)(2)(ii)(B)) because that application was filed after June 30, 2001 or is available in the IWF. Applicant's unique citation number(s), (optional).  
CITE CODES of USPTO Patent Documents at [www.uspto.gov](http://uspto.gov) or MPEP 901.14. Enter Office that issued the patent or publication, by the date of issue, in each patent document account. If the date of issue of the entire document is not known, precede the serial number of the patent document with "S". End of document by the appropriate symbols as indicated on the document under WIPO Standard ST-16 if applicable. An asterisk is placed in front of each patent document. End of document by the appropriate symbols as indicated on the document under WIPO Standard ST-16 if applicable.

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Substitute for form 1449/PTO				<i>Complete if Known</i>
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>				
(Use as many sheets as necessary)				
Sheet	2	of	2	Attorney Docket Number
				2565-0273P

## NON-PATENT LITERATURE DOCUMENTS

Examiner Signature	Date Considered	
-----------------------	--------------------	--

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup>Applicant's unique citation designation number (ordinal). <sup>2</sup>Applicant is to place a check mark here if English language Translation is attached.